

IN THE UNITED STATES DISTRICT COURT

FOR THE DISTRICT OF NEW MEXICO

Ruben J Garcia

FILED
UNITED STATES DISTRICT COURT
DISTRICT OF NEW MEXICO

12 AUG 10 PM 4:25

-vs-

No. _____
CLERK-ALBUQUERQUE

State of New Mexico
County of Valencia

12 CV 868 MV /LAM

**FINANCIAL AFFIDAVIT, APPLICATION
TO PROCEED *IN FORMA PAUPERIS*
AND ORDER (28 U.S.C. § 1915)**

I, Ruben Garcia, make under oath the following statement

regarding my financial, residential, marital and employment status, and since I am unable to prepay fees and costs in the above-entitled case, make application to proceed as a pauper in accordance with 28 U.S.C. § 1915:

A. BACKGROUND AND RESIDENCE

1. Full Name: Ruben J Garcia
2. Age: 31 Sex: M
3. Present address: Po Box 570 Santa Rosa NM 88435
4. How long at this address? 5 months Telephone No. _____
5. Married? _____ Single? _____ Divorced? _____ Separated? ✓
6. Number of dependents: 3
7. Ages of children living with you: _____
8. List relationship of other dependents living with you:

9. List any dependents in items 7 and 8 depending on you for support:
Alexandra, Miranda, Vincent, Jacamillo

B. EMPLOYMENT AND INCOME

1. Are you now employed? NO Are you self-employed? NO
2. Name and address of employer: _____

3. Position: _____ Salary per month: \$ _____
4. If self-employed, nature of business: _____
5. Income previous month from self-employment: \$ _____
6. If unemployed, how long since last job or self-employment: _____
7. Any other income such as disability pay, worker's compensation, social security, pension, interests, note and loan repayments, dividends, trust funds, unemployment compensation? _____
8. If so, indicate source and amount per month: \$ _____
9. Total monthly net income: \$ _____

C. ASSETS

1. Do you own any real estate? Yes _____ No ✓
 - a. Description: _____
 - b. Location: _____
 - c. Estimated Present Value: _____
 - d. Estimated outstanding mortgages or contracts on property: _____

 - e. Payments per month: _____
2. Do you own any automobiles? Yes _____ No ✓
 - a. Make: _____ Model: _____ Year: _____
 - b. Present value: _____ Total amount owed: _____
 - c. Monthly Payments: _____
3. Do you have any stocks or bonds? Yes _____ No ✓
 - a. Describe: _____
 - b. Present Value: _____
4. Do you have any cash in the bank? Yes _____ No ✓
 - a. If so, indicate amount: _____
5. Do you have any cash in savings and loan associations? Yes _____ No ✓

6. Do you have any other assets not listed above, excluding household furnishings and clothing? Yes _____ No ✓

a. If so, describe and give value: _____

D. DEBTS AND OTHER OBLIGATIONS

1. Rent _____ per month
 2. Utilities _____ per month
 3. Creditors:

<u>List:</u>	<u>Total Due</u>	<u>Monthly Payment</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. Total Monthly Payments: \$ _____

Wilber Garcia
 Signature of Applicant/Affiant

SUBSCRIBED AND SWORN to before me this _____ day of _____,

 Notary Public

My Commission Expires:

UNITED STATES DISTRICT COURT
DISTRICT OF NEW MEXICO

Ruben Garcia,
Plaintiff

vs.

State of New Mexico
Defendant

Civil Action No. _____

MOTION FOR FREE PROCESS

COMES NOW _____, and moves this court its' order allowing free process in this case. As grounds for this motion, movant states that because of indigency, he or she cannot afford to pay court fees and costs. Movant has attached hereto an eligibility determination for indigent services form.

Ruben Garcia (Sign name)
Ruben Garcia (Print name)
Po Box 520 (Address)
Santa Rosa NM
884135

FINANCIAL CERTIFICATE
(Initial filing or appeal/IFP application)

Ruben Garcia
INMATE NAME (please print)

67967
INMATE NUMBER

U.S.DISTRICT COURT CASE NUMBER: _____

1. Inmate's average monthly DEPOSITS for six preceding months: \$ _____.
2. Inmate's average monthly BALANCE for six preceding months: \$ _____.
3. CURRENT ACCOUNT BALANCE:
Funds accessible to inmate as of _____ (date), including amount in savings
account, in excess of minimum amount that must be maintained: \$ _____.
4. Attached hereto is a copy of the inmate's financial transactions for the six preceding
months.

I hereby certify that as of this date, the above financial information is accurate for
the above-named inmate, and that a copy of this certificate is being provided to the above-
named inmate.

AUTHORIZED OFFICER

TITLE: _____

DATE

FINANCIAL AFFIDAVIT

CJA 23
(REV. 5/06)

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICE WITHOUT PAYMENT OF FEE

IN UNITED STATES

☐ MAGISTRATE ☒ DISTRICT ☐ APPEALS COURT or ☐ OTHER PANEL (Specify below)

IN THE CASE OF:

Ruben Garcia vs. New Mexico

FOR

AT

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

DOCKET NUMBERS

Magistrate

District Court

Court of Appeals

CHARGE/OFFENSE (describe if applicable & check box -)

☒ Felony☐ MisdemeanorPossession

- 1 ☒ Defendant - Adult
 2 ☐ Defendant - Juvenile
 3 ☐ Appellant
 4 ☐ Probation Violator
 5 ☐ Parole Violator
 6 ☐ Habeas Petitioner
 7 ☐ 2255 Petitioner
 8 ☐ Material Witness
 9 ☐ (Specify) _____

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self Employed	
	Name and address of employer: _____	
	IF YES, how much do you earn per month? \$ _____	IF NO, give month and year of last employment How much did you earn per month? \$ _____
	If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, how much does your Spouse earn per month? \$ _____ If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____	
OTHER INCOME	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY \$ THE SOURCES	RECEIVED _____ _____ _____ SOURCES _____ _____ _____
CASH	Have you any cash on hand or money in savings or checking account <input type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ _____	
PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	IF YES, GIVE THE VALUE AND \$ DESCRIBE IT	VALUE _____ _____ _____ DESCRIPTION _____ _____ _____

DEPENDENTS	MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input checked="" type="checkbox"/> SEPARATED OR DIVORCED	Total No. of Dependents _____	List persons you actually support and your relationship to them _____ _____ _____ _____		
OBLIGATIONS & DEBTS	DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME:	Creditors	Total Debt	Monthly Payt.
		_____	_____	\$ _____	\$ _____
		_____	_____	\$ _____	\$ _____
		_____	_____	\$ _____	\$ _____
		_____	_____	\$ _____	\$ _____

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) _____

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)Ruben Garcia